OKLAHOMA EMPLOYMENT SECURITY COMMISSION POWER OF ATTORNEY – TAX

Oklahoma Account #	, Federal ID #
I hereby appoint:	
Name: Address:	
City, State, and Zip:	
Telephone No.:	
Fax No.:	
effect until the Oklahoma Employment Securevocation of a Power of Attorney or a notice of Oklahoma Employment Security Commission in-fact is authorized to receive all confidential	Power of Attorney shall be effective immediately and shall remain in urity Commission receives notice of its revocation. A notice of a of change of address must be in a separate writing and mailed to the at P.O. Box 52003, Oklahoma City, OK 73152-2003. The attorneyal information pertaining to the taxpayer's unemployment insurance all earlier Powers of Attorney previously granted by the taxpayer for
Date	Signature
	Printed Name
	Title
	<u>ACKNOWLEDGMENT</u>
State of)	
County of)	
	ary public in and for this county and state, personally appeared wledged to me that he/she executed the above instrument in his/her
official capacity as the free and voluntary act a ln witness of this fact, I s	and deed of himself/herself and the taxpayer.
Official Seal with Commission Number And Expiration Date:	
·	Notary Public

